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October 24, 2016 (<http://www.truthsayers.org/2016/10/24/nurses-leaving-cayuga-medical-center-in-mass-exodus/>)

Nurses Leaving Cayuga Medical Center in 'Mass Exodus'

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By Josh Brokaw

“Mass exodus” are the most common words being used by current and former Cayuga Medical Center employees to describe the number of nurses who have been leaving Tompkins County’s only hospital.

In his last three months at CMC, “you could practically hear the toilet running” as staffers took their talents to other hospitals, said Scott Marsland, an emergency department registered nurse [RN] who left CMC in May for Syracuse’s Upstate University Hospital. “Still, there’s good nurses there, but some of the best educated, most skilled nurses, the most independent thinking, they left. It’s been a hemorrhage of intellect and experience.”

According to Anne Marshall, of the 175 CMC nurses that had signed cards by autumn 2015 asking for a vote to join Service Employees International Union Local 1199, 40 have since left.

Evidence of staff leaving CMC is necessarily anecdotal. As a non-profit corporation, detailed information about CMC’s staffing numbers and budget are not public. In addition, hospital staff who work entirely within one department can only be expected to know what’s happening there; few nurses have many interactions with staff on other units or floors in most hospitals. That said, according to nurses interviewed for this story, turnover seems to be particularly high in the emergency department [ED], intensive care unit [ICU], and behavioral services unit [BSU], areas where there has also been strong support for unionization.



Cayuga Medical Center, October 2016. Photograph: Josh Brokaw

“Rhonda,” a former BSU nurse whose name we withhold because she wants to keep working in Tompkins County and fears reprisals, said there had been a “mass exodus” from her unit – often called the “psych ward” on the street – about the time she left in April 2016. A commenter on the Unionizing CMC Facebook group reported that three nurses left the BSU within the space of a couple weeks in March 2016. A schedule for July and August listed 19 nurses in total on the 26-bed unit, including nurses flexing from other departments and part-timers.

Marshall lists 13 nurses, including herself and another nurse terminated earlier this month, that have left the 16-bed ICU over the last year.

CMC RNs Fired: Policy Violation or Union Busting? Read the story about Marshall's

termination at the link.

(<http://www.truthsayers.org/2016/10/13/cmc-rns-fired-policy-violation-or-union-busting/>)

Cristina Avalor, an ED nurse who left in June, reports that “11 of us left in one month alone, from May into June.”

Cheryl Durkee, who's still working in the 19-bed ED, says her department has lost three-quarters of its nurses over the past six months or so, with two more leaving this week. There were 28 nurses on staff in spring 2015.

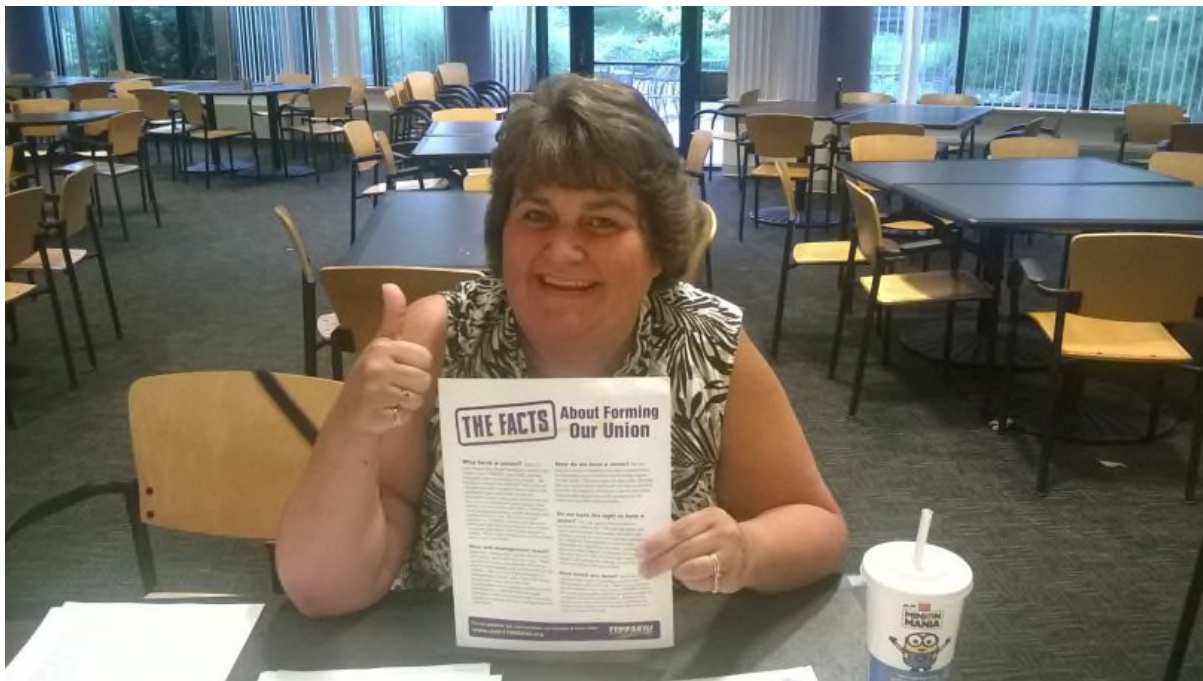
“I would say we've had 13 leave over the last six months or so,” Durkee said. “It's unreal. When the new director of nursing came in a couple months ago she sat everybody down two by two to talk to us. The other nurse said ‘I'm concerned about the amount of people who have left,’ and [the director] said ‘This is typical of any emergency department.’ I said I've been working over 30 years as a nurse, and this is the furthest thing from typical in anywhere I've worked.”

Belinda Howell, a RN who left the Ithaca Convenient Care center this past summer, said she was the third RN to leave the outpatient care center within four months. The Convenient Care center usually has two RNs on during days, Howell said, sometimes three, with four working on weekends or typically busy evenings. A large number of those RNs are paid per diem.

Michael Doan left CMC's cardiac catheterization laboratory this spring; at the time "four or five nurses were looking or moved into something else." When he left his director position in 2014 on the 4th floor, turnover was 40 percent yearly, with a goal of 20 percent, Doan said.

CMC's fourth floor contains a telemetry unit and medical beds, for a total of about 50 beds and 30 nurses, according to David Kraskow, a CMC RN since 1998. Turnover is expected at CMC, Kraskow said, particularly on the fourth floor, which employs at any one time a number – "maybe five, maybe eight" – of graduate nurses getting their first professional experience. Other nurses start at CMC on the fourth floor, and might be there for six months before moving onto a higher-intensity department like the ED or ICU. In former times, the understanding was that nurses had at least a year's experience before making that sort of move.

"A problem the union needs to address is people on our unit are floated to other units, where you do need more experience, but they don't have the staff," Kraskow said. "In those places the stakes are a bit higher – having experience really helps more in the outcomes."



Cayuga Medical Center nurse Cheryl Durkee tables in CMC cafeteria. Photograph via Facebook.

CMC administration has maintained that the rate of turnover is not unusual via in-house emails to staff. John Turner, CMC vice president for public relations, and Brian Forrest, vice president for human relations, did not return multiple calls and emails for this story asking for comment.

Alan Pedersen, former CMC vice president of human relations, wrote in a July 22, 2015 email that "It has been alleged that we reduced our nursing staffing levels on the 4th floor due to a budget crunch. **That is false.** Today, Cayuga Medical Center employs more nurses than at any time in our history ..." [emphasis in the original].

In an email to CMC staff dated Sept. 24, 2015, Pedersen acknowledged that “Cayuga Medical Center, along with most other hospitals in upstate NY, continues to face challenges in filling positions. But, unlike many other hospitals we have been successful in continuing to attract Registered Nurses to our organization, and, many are in orientation as we speak.

“In fact since May, we have been able to hire more than 40 new RN’s. Are there vacancies, yes. Are there any hospitals in upstate NY that don’t have vacancies, no.”

In an Aug. 9, 2016, email to staff reminding them “unionization is a matter of employee choice,” Brian Forrest, who replaced the retired Pedersen on July 1, 2016, wrote that CMC strives “to create and maintain a culture of teamwork, mutual respect, cooperation and a patient-centered care among all staff. We believe this environment serves everyone’s best interests and is one of the reasons that our turnover has been lower than the published statistics* about other facilities/areas.” Forrest wrote that turnover for RNs leaving full-time or part-time jobs at CMC in 2015 was 11.3 percent, compared to a 14.3 percent estimate of turnover in central New York from a 2015 study by the Healthcare Association of New York State.

(<http://www.aacn.nche.edu/media-relations/nursing-shortage-resources/2015-NY-Workforce-Report.pdf>)

The “published statistics” Forrest used also included a comparison of CMC’s turnover rate to “53% in the heavily unionized Buffalo area and 31% in the Rochester Regional area,” according to a document called “DataPoint: Nursing Staff Turnover Rates.” Those numbers from Buffalo and Rochester appear to be taken from a summary of a study using 2013

numbers (<http://www.leadingagency.org/topics/data/datapoints-archive/datapoint-nursing-staff-turnover-rates/>) from LeadingAge NY, a trade group that was exclusively surveying nursing homes.

[Finding accurate and relevant numbers about RN turnover rates is difficult; as this 2014 study notes (<http://www.futurity.org/nurses-high-turnover-762532/>), “policy makers and managers concerned with finding comparable turnover rates face a daunting task to locate these rates. Reported RN turnover rates vary considerably over time, across settings, and by definitions used.”]

Pedersen also noted in multiple emails in summer and fall 2015 that CMC had decided to use traveling nurses, with those travelers – who sign contracts for two or three months at a time – working in “Emergency, ICCU, Surgical Services and the Fourth Floor.”

“Those individuals are here based on need and our commitment to support our staff,” Pedersen wrote in September 2015.

Nurses who spoke for this story say that they had asked for CMC to bring in travel nurses to help with staffing gaps over recent years, but there was a policy in place restricting their use. When, exactly, that policy was instituted isn't clear: Durkee remembers it going into place when CEO John Rudd took over in 2013, while Marsland believes it was a cost-saving measure put into place by former CMC CEO Rob Mackenzie. Kraskow remembers a short-lived moratorium on using travelers as far back as 2000, which didn't stick for very long.

The clear incentive for a hospital to avoid using travel nurses is cost. An Aug. 25, 2016, job listing email from Fastaff, one of the travel nursing agencies CMC has contracted with, lists an opening for \$48 an hour for an ED nurse on nights and weekends. Recent postings for a hospital in Ithaca by the agency Supplemental Health Care lists an hourly rate of \$35 to \$40 an hour for an ICU Rn (<http://www.supplementalhealthcare.com/job/info/536970>), plus travel pay as high as \$1,600 per week and a sign-on bonus as high as \$1,000. Other current postings by Supplemental Health Care list rates of \$37 per hour for six-week psychiatric nurse contracts and \$42 per hour for 13-week emergency room contracts. Housing and travel costs are also paid by staffing agencies, which are included in the fees they are paid by a hospital. CMC nurses guess that the hospital pays a total of \$75 to \$100 per hour to staffing agencies for a travel nurse. CMC nurses' pay comes in between about \$25 and \$30 per hour, according to their self-reporting.

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RN Travel Nurse Registered Nurse

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Facility: HOSPITAL

Discipline: Registered Nurse

Job Type: Local

Estimated Our Rewards Points: 20592 (?)

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Requirements:
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BLS - American Heart only

ACLS or other certification needed for your specialty - NRP, etc.

2 years of experience in the US as an RN

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Screenshot of job posting at supplementalhealthcare.com, October 24, 2016.

Whenever the most recent prohibition on using travelers began, nurses say they only had a response to their requests for travel staffers after CMC administration became aware of the union organizing campaign in May 2015.

When Avelle started at CMC in March 2014, there were “no travelers whatsoever” working in the ED, she said.

“Can we bring in travelers to fill in gaps and make sure we’re fully staffed every day?” Avelle said staff asked management during meetings. “‘We’re fully staffed, we can’t afford them,’ they said. Then the union came on and they started to bring on travelers.”

“Not until they found out we were bringing in the union did they do something,” Marshall said of travelers, while “nurses who weren’t working enough hours and had to find other jobs were ignored. They were trying to get rid of union supporters and still are.”

In the BSU, a nurse posted on Facebook that there were two travelers working there in November 2015, the first travelers used there since she started working on that unit in 2006.

As she was searching job sites this summer, Rhonda said she saw “no permanent positions listed for area and lots of travelers.”

“My thought was this has to do with the union,” Rhonda said. “Traveling staffers can’t be swayed.”

Durkee says that the emergency department is “practically 50 percent travelers” right now. When a patient was “coding” last week – in need of immediate resuscitation – “I had to ask for help and didn’t know the two people’s names I had to ask,” Durkee said.

“At times when they’ve been rationalizing cutting [costs] elsewhere,” Kraskow said of CMC administration, “they’ve said they’re spending five million on travelers, they cost at least 100 percent more. It’s extraordinarily clear they’re happy to have travelers now, as they don’t have to deal with ‘those people,’ like me, who are here for the long run.”

“They get rid of all the union people and think we can start all over again,” Durkee said of the CMC administration’s mindset. “One of the managers said to me, ‘Yes, it is a crisis.’ I asked him to say one thing the next time someone resigns: ‘What can we do to get you to stay?’ What they’ve been saying is ‘You better give two weeks’ notice or you won’t get paid for vacation time.’”

“The fact is management does not care,” Durkee said. “If only, the thing I’m sure they care about is they pay more money to travelers and care less about nurses who left. These nurses had a lot of experience, really good, intelligent, skilled nurses have left. They’ve replaced them with travelers, who aren’t staying – they’re not vested in this community.”



Since April 2015, nurses at Cayuga Medical Center, Tompkins County’s only hospital, have been organizing to form a union.

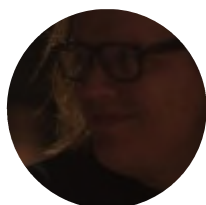
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(<https://www.paypal.me/Truthsayers>). Send me tips and suggestions at the email below.

Next up in this series: Cayuga Medical Center nurses say they are organizing in large part because staffing ratios for nurses and security are unsafe.

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Josh Brokaw is an independent reporter based in Ithaca, N.Y.
Email josh.brokaw@truthsayers.org with tips, story suggestions, and gentle criticism.
Twitter: [@jdbrokaw](https://twitter.com/jdbrokaw)

4 thoughts on “Nurses Leaving Cayuga Medical

Center in 'Mass Exodus'”



KELLY |

OCTOBER 24, 2016 AT 4:49 PM

([HTTP://WWW.TRUTHSAYERS.ORG/2016/10/24/NURSES-LEAVING-CAYUGA-MEDICAL-CENTER-IN-MASS-EXODUS/#COMMENT-3](http://www.truthsayers.org/2016/10/24/nurses-leaving-cayuga-medical-center-in-mass-exodus/#comment-3))

I left for other reasons. Mainly workplace lateral violence, as did another nurse. The VP of HR did nothing about the situation. Good people leave, and the troublemakers still have jobs. Not to mention the fact management does not care. Swept under the rug.

Pingback: 'Tragically, he died alone:' Cayuga Medical Center Nurses Say Staffing Levels Unsafe – TruthSayers

(<http://www.truthsayers.org/2016/10/26/tragically-he-died-alone-cayuga-medical-center-nurses-say-staffing-levels-unsafe/>)



JOYCE BLEIWEISS |

OCTOBER 27, 2016 AT 9:51 PM

([HTTP://WWW.TRUTHSAYERS.ORG/2016/10/24/NURSES-LEAVING-CAYUGA-MEDICAL-CENTER-IN-MASS-EXODUS/#COMMENT-6](http://www.truthsayers.org/2016/10/24/nurses-leaving-cayuga-medical-center-in-mass-exodus/#comment-6))

I wonder how many people have been hired or received pay raises in the administrative wing or who received bonuses while the nurses received nothing?

Pingback: Union Busting? Cayuga Medical Center Hearings, Day Four – TruthSayers (<http://www.truthsayers.org/2017/01/12/union-busting-cayuga-medical-center-hearings-day-four/>)

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October 24, 2016 ·

I am posting this article here to educate people in our community that rely on this hospital as to what is actually going on there. I know we all see the glossy ad campaign. It's beautiful. There are even great aspects to this hospital and wonderful care givers, but there is a huge issue with quality care in certain departments and they are being staffed by nurses with no vested interest in this community. This hospital has fired and pushed out some of its most experienced ... [See More](#)

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Discipline: Registered Nurse

Job Type: Local

Estimated Our Rewards Points: 20592 (7)

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BLS - American Heart only
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reasons for organizing to join SEIU Local 1199. One of the first things many said to me was there's been a recent "mass exodus" of staff at CMC.

This story is the first of a 5- to 15-part series about the state of affairs at Tompkins County's only hospital. Like this page and/or follow on Twitter @truthsayersnews for future installments.

- Josh Brokaw

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Job Type: Local

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Description:
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Chris Nielsen Berg This might explain why my daughter has had to wait for many hours to get care for her asthma and bronchitis at two recent visits to the